



County of San Bernardino

F A S

STANDARD CONTRACT

AMENDMENT NO. 1

FOR COUNTY USE ONLY

| | | | | | | | |
|---|--|--------------|--|----------------|---------------------|--------------------------|------------------|
| E | New | Vendor Code | | | Dept. | Contract Number | |
| M | <input checked="" type="checkbox"/> Change | SC | | | 707 | A | 03-836 A1 |
| X | Cancel | | | | | | |
| County Department | | | | Dept. | | Orgn. | |
| San Bernardino Int'l Airport Authority | | | | | | Contractor's License No. | |
| County Department Contract Representative | | | | Phone # | | Amount of Contract | |
| Penny Chua | | | | 382-4100, x243 | | \$40,591.00 | |
| Fund | Dept. | Organization | Appr. | Obj/Rev Source | GRC/PROJ/JOB Number | | Termination Date |
| NKL | ACT | 410 | 100 | 1010 | ALANIS | | |
| Commodity Code | | | Estimated Payment Total by Fiscal Year | | | | |
| | | | FY | Amount | I/D | FY | Amount |
| Project Name | | | | | | | |
| | | | | | | | |
| | | | | | | | |

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and

Name

Amelia Alanis

hereinafter called Contractor

Address

Phone

Birth Date

Federal ID No. or Social Security No.

IT IS HEREBY AGREED AS FOLLOWS:

(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)

Pursuant to the San Bernardino International Airport Authority Commission Action on June 9, 2004, Section 2 of Contract 03-836 for Amelia Alanis is to read:

The County shall pay the Contractor and the Contractor agrees to accept the following base hourly wage rate as compensation for labor or services rendered ("Salary").

- i) Commencing June 26, 2004, the Contractor shall receive **\$19.44** per hour as Salary. The Salary as set forth shall remain in effect until such time, if any, this employment contract is duly modified by the parties.

All other terms and conditions of the employment contract remain the same.

COUNTY OF SAN BERNARDINO

►
Dennis Hansberger, Chairman, Board of Supervisors

Dated: _____

SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Clerk of the Board of Supervisors
of the County of San Bernardino.

By _____
Deputy

(Print or type name of corporation, company, contractor, etc.)

By ►
(Authorized signature - sign in blue ink)

Name _____ Amelia Alanis
(Print or type name of person signing contract)

Title _____ Secretary II
(Print or Type)

Dated: _____

Address: ON FILE

Approved as to Legal Form

►
County Counsel

Date _____

Reviewed by Contract Compliance

►

Date _____

Reviewed for Processing

►
Agency Administrator/CAO

Date _____

